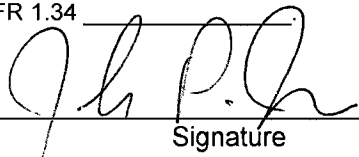


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 <i>(fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818))</i>		Docket Number 62130-0002	
In re Application of	Richard Anthony Godwin SMITH et al.		
Application Number	09/936,205	Filed	October 29, 2001
For	ORGAN TRANSPLANT SOLUTIONS CONTAINING CONJUGATES OF SOLUBLE PEPTIDIC COMPOUNDS WITH MEMBRANE-BINDING		
Art Unit	1656	Examiner	A. Rooke
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter appropriate fee below):			
	Large Entity Fee	Small Entity Fee	Amount
<input type="checkbox"/> First month (37 CFR 1.17(a)(1))	\$ 120	\$ 60	\$ _____
<input type="checkbox"/> Second month (37 CFR 1.17(a)(2))	\$ 330	\$ 165	\$ _____
<input type="checkbox"/> Third month (37 CFR 1.17(a)(3))	\$ 570	\$ 285	\$ _____
<input checked="" type="checkbox"/> Fourth month (37 CFR 1.17(a)(4))	\$ 570	\$ 285	\$ 285.00
<input checked="" type="checkbox"/> Fifth month (37 CFR 1.17(a)(5))	\$ 570	\$ 285	\$ 285.00
Total: \$ 570.00			
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-3840 . I have enclosed a duplicate copy of this sheet.			
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number: 33,715 <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____			
<u>May 31, 2007</u> Date		 Signature	
<u>(202) 416-6800</u> Telephone Number		<u>John P. Isacson</u> Typed or printed name	
<u>Customer No.: 61263</u>			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. see below.